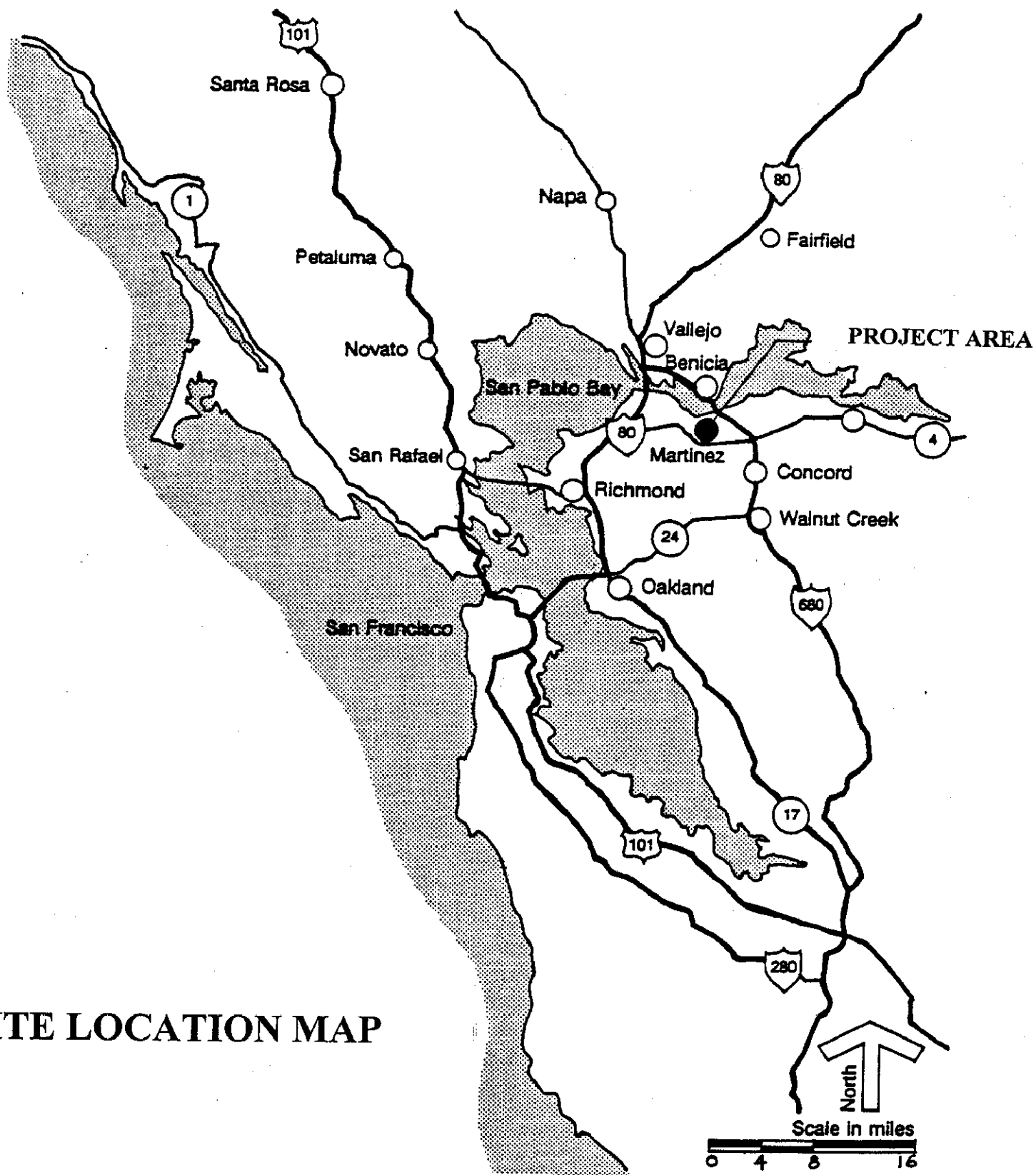
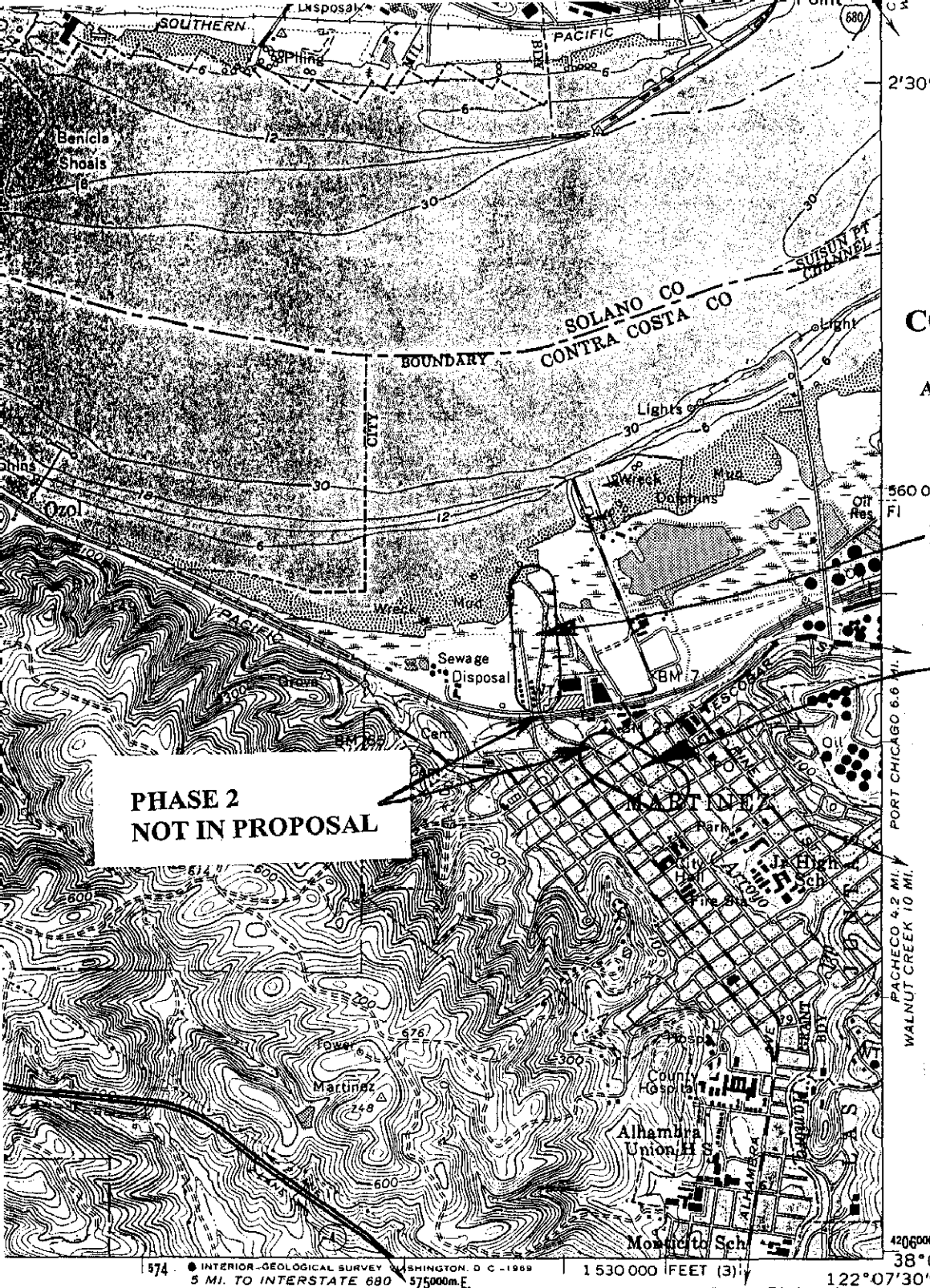


SITE LOCATION MAP





CITY OF MARTINEZ
CONTRA COSTA COUNTY
ALHAMBRA CREEK WATERSHED

**PHASE 3
NOT IN PROPOSAL**

**PHASE 1
PROPOSAL
PROJECT AREA**

**PHASE 2
NOT IN PROPOSAL**

ROAD CLASSIFICATION

- | | | | |
|--------------------|-------|-----------------|-------|
| Heavy-duty | ————— | Light-duty | ————— |
| Medium-duty | ————— | Unimproved dirt | ----- |
| ○ Interstate Route | | ○ State Route | |

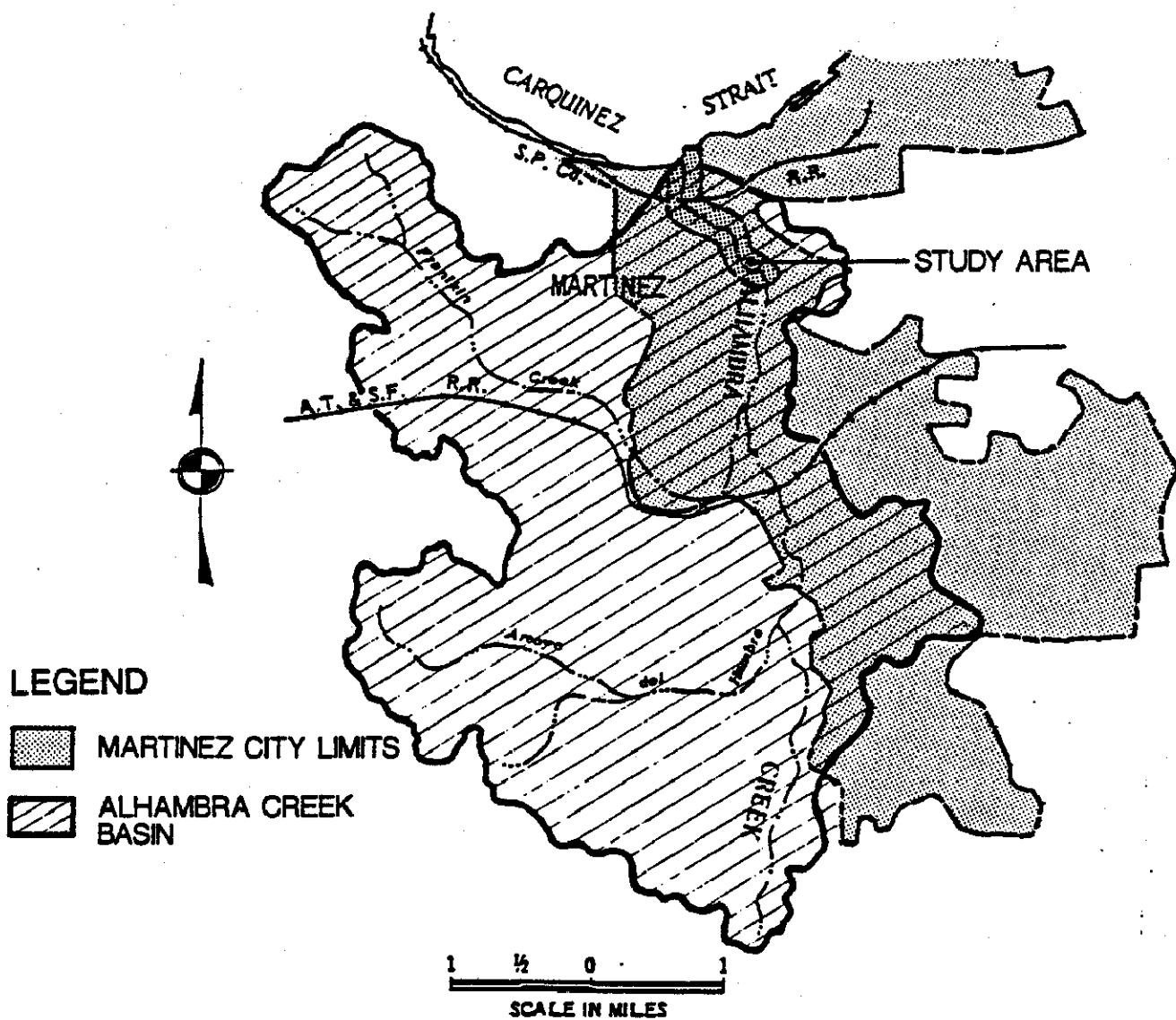


BENICIA, CALIF.
 SW/4 CARQUINEZ STRAIT 15' QUADRANGLE
 N3800—W12207.5/7.5

Scale 1 : 24000
38° 01' N 122° 08' W

1959
 PHOTOREVISED 1968
 AMS 1560 II SW—SERIES V895

Revisions shown in purple compiled from aerial photographs taken 1968. This information not field checked. Purple tint indicates extension of urban areas.

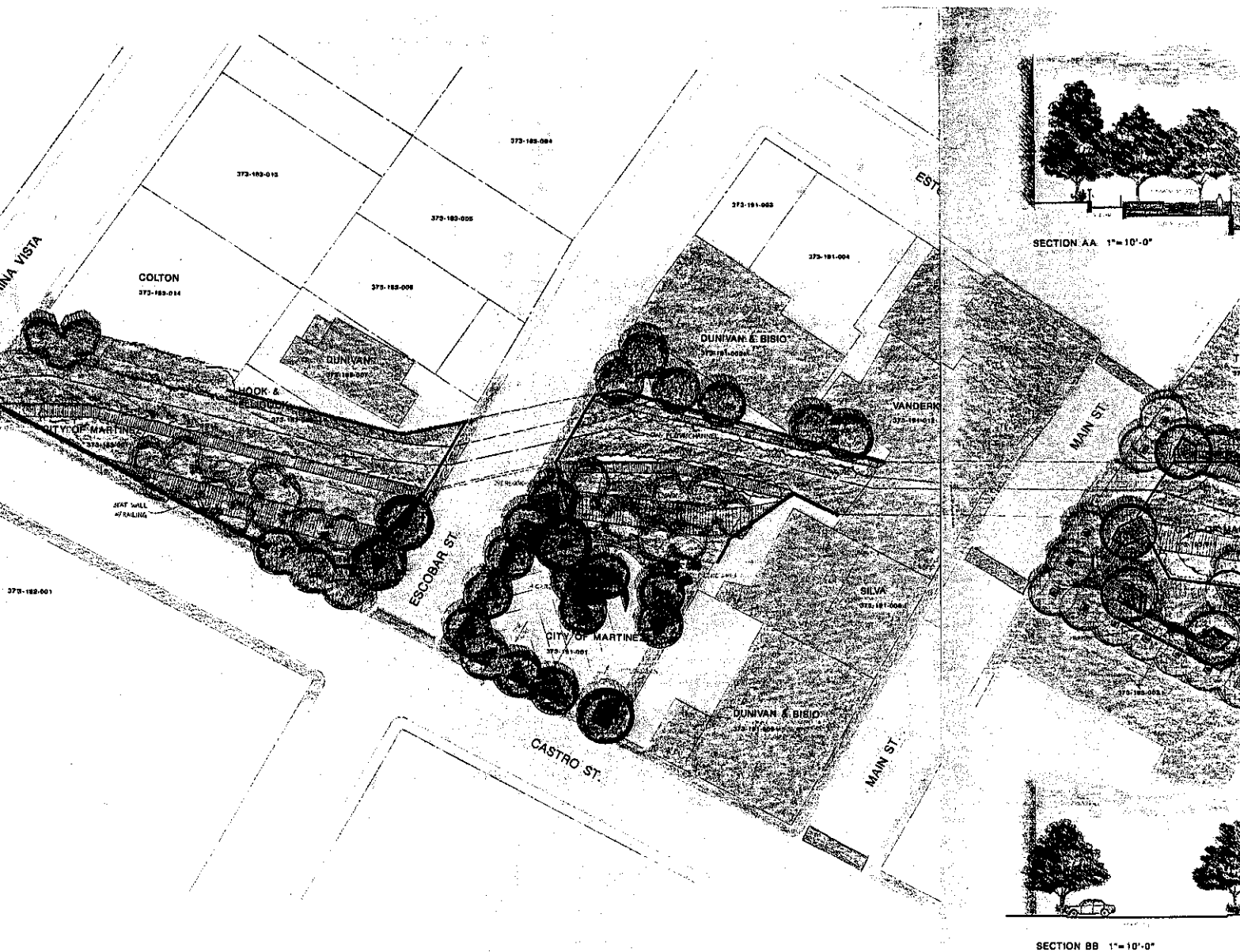




LOOKING TO WARD STREET FROM THE PARKING LOT AT THE MAIN STREET PLAZA



BACK OF THE OLD CITY HALL BUILDING



JOHN NORTHMORE ROBERTS & ASSOCIATES
 LANDSCAPE ARCHITECTURE & LAND PLANNING
 LICENSE NO. 1880
 2827 NEWBURY STREET, SUITE D
 BERKELEY, CALIFORNIA 94703
 TEL. (510) 843-3886
 FAX. (510) 848-0288

Rev. No.

Date 2-18-98

Sheet

Job No. 138-002

MAL

Scale 1"=20'-0"

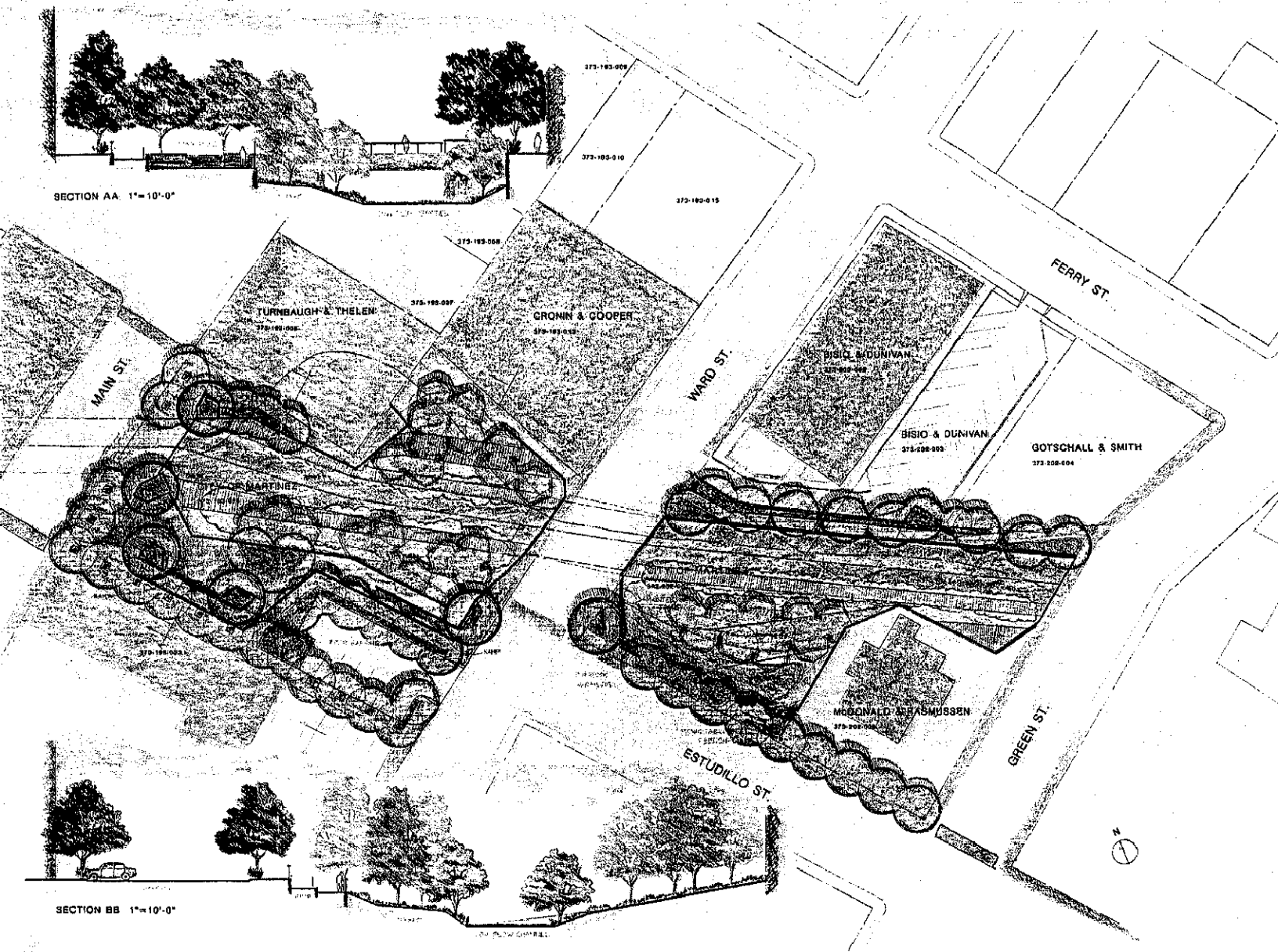
Proposed

Drawn

CL

Checked

Approved



JOHN NORTHMORE ROBERTS & ASSOCIATES
 LANDSCAPE ARCHITECTURE & LAND PLANNING
 LICENSE NO. 1880
 2027 NEWBURY STREET, SUITE B
 BERKELEY, CALIFORNIA 94703
 TEL. (510) 945-3868
 FAX. (510) 945-0255

Rev. No.	_____	Date	2-18-98
Job No.	138-002	Scale	1"=20'-0"
Drawn	_____	Checked	_____
Approved	_____	Approved	_____

Sheet Title PROPO
 GREEN ST. TO
 CHANNEL



W.D. Rasmussen, D.D.S.

647 Green Street
Martinez, California 94553
(510) 228-1191

April 9, 1999

Ms. Marcia Raines
City Manager
CITY OF MARTINEZ
525 Henrietta Street
Martinez, Ca 94553

Subject: Alhambra Creek Channel Enhancements
Marina Vista to Green Street

Dear Ms. Raines:

As you know, we own property along the Alhambra Creek Channel Enhancements project. We understand that this project may require additional right-of-way to implement the proposed creek enhancements. Although the City has not formally approached us in regards to obtaining access rights, we are in full support of the project and look forward to working with the city on an informal basis so that adequate right-of-way and easements rights affecting our property are obtained.

Sincerely,

Name:

Address:

APN:

NORMAN W. McDONALD, D. D. S., INC.
647 GREEN STREET
MARTINEZ, CALIFORNIA 94553
(415) 228-0436

April 9, 1999

Ms. Marcia Raines
City Manager
CITY OF MARTINEZ
525 Henrietta Street
Martinez, Ca 94553

Subject: Alhambra Creek Channel Enhancements
Marina Vista to Green Street

Dear Ms. Raines:

As you know, we own property along the Alhambra Creek Channel Enhancements project. We understand that this project may require additional right-of-way to implement the proposed creek enhancements. Although the City has not formally approached us in regards to obtaining access rights, we are in full support of the project and look forward to working with the city on an informal basis so that adequate right-of-way and easements rights affecting our property are obtained.

Sincerely,

Norman W. McDonald, D.D.S.

Name: Norman W. McDonald, D.D.S.

Address: 775 Shell Ave.
Martinez, Ca 94553

APN: (925) 228-2970

April 9, 1999

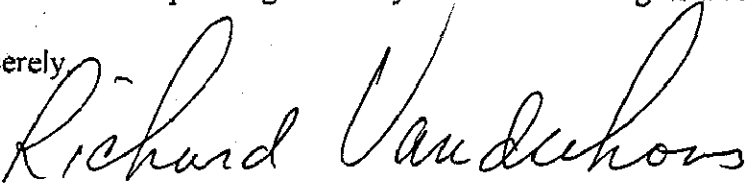
Ms. Marcia Raines
City Manager
CITY OF MARTINEZ
525 Henrietta Street
Martinez, Ca 94553

Subject: Alhambra Creek Channel Enhancements
Marina Vista to Green Street

Dear Ms. Raines:

As you know, we own property along the Alhambra Creek Channel Enhancements project. We understand that this project may require additional right-of-way to implement the proposed creek enhancements. Although the City has not formally approached us in regards to obtaining access rights, we are in full support of the project and look forward to working with the city on an informal basis so that adequate right-of-way and easements rights affecting our property are obtained.

Sincerely,



Name: RICHARD VANDERKOUS

Address: ~~HB~~ 649 MAIN ST.

APN: 373-191-012-S

ALBERT J. TURNBAUGH, ESQ.
A Professional Corporation
706 Main Street, Suite A
Martinez, California 94553

Julie A. Pulsipher
Legal Assistant

Telephone: 925/229-4550
Facsimile: 925/229-3648

April 12, 1999

Ms. Marcia Raines
City Manager
CITY OF MARTINEZ
525 Henrietta Street
Martinez, CA 94553

Subject: Alhambra Creek Channel Enhancement
Marina Vista to Green Street

Dear Ms. Raines:

As you know, we own property along the ALhambra Creek Channel Enhancements project. We understand that this project may require additional right-of-way to implement the proposed creek enhancements. Although the City has not formally approached us in regards to obtaining access rights, we are in full support of the project and look forward to working with the city on an informal basis so that adequate right-of-way and easements affecting out property are obtained.

Sincerely,


ALBERT J. TURNBAUGH


JAMES L. THELEN

Address: 700-712 Main St.

APN : 373-193-006-5

EARL DUNIVAN & ASSOCIATES
P.O. BOX 747
MARTINEZ, CA 94553
(925) 228-4788 Fax (925) 228-3789

April 12, 1999

Mrs. Marcia Raines
City Manager
CITY OF MARTINEZ
525 Henrietta Street
Martinez, CA 94553

Subject: Alhambra Creek Channel Enhancements
Marina Vista to Green Street

Dear Mrs. Raines:

As you know, we own property along the Alhambra Creek Channel Enhancements project. We understand that this project may require additional right-of-way to implement the proposed creek enhancements. Although the City has not formally approached us in regards to obtaining access rights, we are in full support of the project and look forward to working with the city on an informal basis so that adequate right-of-way and easements rights affecting our property are obtained.

Sincerely,



Earl D. Dunivan
725 Marina Vista
Martinez, CA 94553

EDD:cl



City of Martinez

525 Henrietta Street, Martinez, CA 94553-2394

(925) 372-3505
FAX (925) 229-5012

April 8, 1999

Gayle Uilkema, Supervisor
Contra Costa County - District 2
651 Pine Street - Rm. 208
San Francisco, CA 94102

Dear Supervisor Uilkema:

SUBJECT: CITY OF MARTINEZ CALFED BAY-DELTA PROGRAM GRANT APPLICATION

This letter is to let you know that the City of Martinez intends to submit a proposal to the CALFED Bay-Delta Program for a grant for habitat restoration on Alhambra Creek in the City of Martinez. Should this grant be approved, the City will be able to provide enhanced ecological/biological benefits during the City's forthcoming Alhambra Creek Channel Improvement Project between Marina Vista and Green Street.

Sincerely,

Marcia Raines
City Manager

cc: Phil Batchelor - County Administrator
County Clerk of the Board - Rm. 106
Jim Zumwalt, City Engineer



City of Martinez

525 Henrietta Street, Martinez, CA 94553-2394

(925) 372-3505
FAX (925) 229-5012

April 8, 1999

Steve McAdam, Deputy Director
Bay Conservation and Development Commission
30 Van Ness Avenue, Room 2011
San Francisco, CA 94102

Dear Mr. McAdam:

SUBJECT: CITY OF MARTINEZ CALFED BAY-DELTA PROGRAM GRANT APPLICATION

This letter is to let you know that the City of Martinez intends to submit a proposal to the CALFED Bay-Delta Program for a grant for habitat restoration on Alhambra Creek in the City of Martinez. Should this grant be approved, the City will be able to provide enhanced ecological/biological benefits during the City's forthcoming Alhambra Creek Channel Improvement Project between Marina Vista and Green Street.

Sincerely,

Marcia Raines
City Manager

cc: Jim Zumwalt, City Engineer

Agreement No. _____

Exhibit _____

**NONCOLLUSION AFFIDAVIT TO BE EXECUTED BY
BIDDER AND SUBMITTED WITH BID FOR PUBLIC WORKS**

STATE OF CALIFORNIA)
)ss
COUNTY OF CONTRA COSTA)

MARCIA RAINES

(name) , being first duly sworn, deposes and
says that he or she is _____
CITY MANAGER

(position title) of
CITY OF MARTINEZ

(the bidder)

the party making the foregoing bid that the bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the bid is genuine and not collusive or sham; that the bidder has not directly or indirectly induced or solicited any other bidder to put in a false sham bid, and has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else to put in a sham bid, or that anyone shall refrain from bidding; that the bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the bid price of the bidder or any other bidder, or to fix any overhead, profit, or cost element of the bid price, or of that of any other bidder, or to secure any advantage against the public body awarding the contract of anyone interested in the proposed contract; that all statements contained in the bid are true; and, further, that the bidder has not, directly or indirectly, submitted his or her bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company, association, organization, bid depository, or to any member or agent thereof to effectuate a collusive or sham bid.

DATED: APRIL 8, 1999

By [Signature]
(person signing for bidder)

Subscribed and sworn to before me on

(Notary Public)

(Notarial Seal)

U.S. Department of the Interior

**Certifications Regarding Debarment, Suspension and
Other Responsibility Matters, Drug-Free Workplace
Requirements and Lobbying**

Persons signing this form should refer to the regulations referenced below for complete instructions:

Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transactions - The prospective primary participant further agrees by submitting this proposal that it will include the clause titled, "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. See below for language to be used; use this form for certification and sign; or use Department of the Interior Form 1954 (DI-1954). (See Appendix A of Subpart D of 43 CFR Part 12.)

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions - (See Appendix B of Subpart D of 43 CFR Part 12.)

Certification Regarding Drug-Free Workplace Requirements - Alternate I. (Grantees Other Than Individuals) and Alternate II. (Grantees Who are Individuals) - (See Appendix C of Subpart D of 43 CFR Part 12)

Signature on this form provides for compliance with certification requirements under 43 CFR Parts 12 and 18. The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of the Interior determines to award the covered transaction, grant, cooperative agreement or loan.

**PART A: Certification Regarding Debarment, Suspension, and Other Responsibility Matters -
Primary Covered Transactions**

CHECK ☒ IF THIS CERTIFICATION IS FOR A PRIMARY COVERED TRANSACTION AND IS APPLICABLE.

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

**PART B: Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion -
Lower Tier Covered Transactions**

CHECK ☐ IF THIS CERTIFICATION IS FOR A LOWER TIER COVERED TRANSACTION AND IS APPLICABLE.

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

PART E: Certification Regarding Lobbying
Certification for Contracts, Grants, Loans, and Cooperative Agreements

CHECK ☒ IF CERTIFICATION IS FOR THE AWARD OF ANY OF THE FOLLOWING AND
THE AMOUNT EXCEEDS \$100,000: A FEDERAL GRANT OR COOPERATIVE AGREEMENT;
SUBCONTRACT, OR SUBGRANT UNDER THE GRANT OR COOPERATIVE AGREEMENT.

CHECK ☐ IF CERTIFICATION IS FOR THE AWARD OF A FEDERAL
LOAN EXCEEDING THE AMOUNT OF \$150,000, OR A SUBGRANT OR
SUBCONTRACT EXCEEDING \$100,000, UNDER THE LOAN.

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

As the authorized certifying official, I hereby certify that the above specified certifications are true.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL



TYPED NAME AND TITLE MARCIA RAINES, CITY MANAGER, CITY OF MARTINEZ

DATE APRIL 8, 1999

APPLICATION FOR FEDERAL ASSISTANCE

OMB Approval No. 0348-004

		2. DATE SUBMITTED APRIL 8, 1999	Applicant Identifier
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	State Application Identifier
Application <input checked="" type="checkbox"/> Construction <input type="checkbox"/> Preapplication Construction <input type="checkbox"/> Non-Construction <input type="checkbox"/> Non-Construction		4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5. APPLICANT INFORMATION			
Legal Name: CITY OF MARTINEZ		Organizational Unit:	
Address (give city, county, State, and zip code): 525 HENRIETTA STREET MARTINEZ, CA 94553		Name and telephone number of person to be contacted on matters involving this application (give area code) [925] 372-3563 JIM ZUMWALT, ACTING CITY ENGINEER	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): 94-6000367		7. TYPE OF APPLICANT: (enter appropriate letter in box) <div style="display: flex; justify-content: space-between;"> <div> A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District </div> <div> H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify) _____ </div> </div> <div style="text-align: right; border: 1px solid black; width: 30px; height: 20px; line-height: 20px; margin: 0 auto;">C</div>	
8. TYPE OF APPLICATION: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration Other(specify): _____		9. NAME OF FEDERAL AGENCY: CALFED	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> TITLE: _____		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: ALHAMBRA CREEK CHANNEL IMPROVEMENTS PROJECT, (LOCATION MAPS WITH APPLICATION)	
12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): CITY OF MARTINEZ, CONTRA COSTA COUNTY, CALIF.			
13. PROPOSED PROJECT		14. CONGRESSIONAL DISTRICTS OF:	
Start Date 10/99	Ending Date 10/05	a. Applicant 7TH	b. Project 7TH
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal Grant Application	\$ 355,000	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. No. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant City	\$ 98,000		
c. State OES HMGP Grant	\$ 947,000		
d. Local Assessment District	\$ 1,500,000		
e. Other	\$		
f. Program Income	\$	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?	
g. TOTAL	\$ 2,900,000	<input type="checkbox"/> Yes If "Yes," attach an explanation. <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Type Name of Authorized Representative MARCIA RAINES		b. Title CITY MANAGER	c. Telephone Number [925] 372-3505
d. Signature of Authorized Representative <i>M. RAINES</i>		e. Date Signed APRIL 8, 1999	

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

- | Item: | Entry: | Item: | Entry: |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Self-explanatory. | 12. | List only the largest political entities affected (e.g., State, counties, cities). |
| 2. | Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable). | 13. | Self-explanatory. |
| 3. | State use only (if applicable). | 14. | List the applicant's Congressional District and any District(s) affected by the program or project. |
| 4. | If this application is to continue or revise an existing award, enter present Federal identifier number. If for a new project, leave blank. | 15. | Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate <i>only</i> the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15. |
| 5. | Legal name of applicant, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application. | 16. | Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. |
| 6. | Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service. | 17. | This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes. |
| 7. | Enter the appropriate letter in the space provided. | 18. | To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.) |
| 8. | Check appropriate box and enter appropriate letter(s) in the space(s) provided:

-- "New" means a new assistance award.

-- "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date.

-- "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. | | |
| 9. | Name of Federal agency from which assistance is being requested with this application. | | |
| 10. | Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested. | | |
| 11. | Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project. | | |

BUDGET INFORMATION -- Construction Programs

NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case you will be notified.

COST CLASSIFICATION	a. Total Cost	b. Costs Not Allowable for Participation	c. Total Allowable Costs (Column a-b)
1. Administrative and legal expenses	\$ 10,000.00	\$	\$ 10,000.00
2. Land, structures, rights-of-way, appraisals, etc.	\$	\$	\$
3. Relocation expenses and payments	\$	\$	\$
4. Architectural and engineering fees	\$	\$	\$
5. Other architectural and engineering fees	\$	\$	\$
6. Project inspection fees	\$ 20,000.00	\$	\$ 20,000.00
7. Site work	\$	\$	\$
8. Demolition and removal	\$	\$	\$
9. Construction	\$ 225,000.00	\$	\$ 225,000.00
10. Equipment	\$	\$	\$
11. Miscellaneous MONITORING	\$ 69,000.00	\$	\$ 69,000.00
12. SUBTOTAL	\$ 324,000.00	\$	\$ 324,000.00
13. Contingencies	\$ 31,000.00	\$	\$ 31,000.00
14. SUBTOTAL	\$ 355,000.00	\$	\$ 355,000.00
15. Project (program) income	\$	\$	\$
16. TOTAL PROJECT COSTS (subtract #15 from #14)	\$ 355,000.00	\$	\$ 355,000.00
17. Federal assistance requested, calculate as follows: (Consult Federal agency for Federal percentage share). Enter the resulting Federal share.	Enter eligible costs from line 16c Multiply X	%	\$ 355,000.00

INSTRUCTIONS FOR THE SF 424C

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0041), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET, SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This sheet is to be used for the following types of applications: (1) "New" (means a new [previous unfunded] assistance award); (2) "Continuation" (means funding in a succeeding budget period which stemmed from a prior agreement to fund); and (3) "Revised" (means any changes in the Federal government's financial obligations or contingent liability from an existing obligation). If there is no change in the award amount there is no need to complete this form. Certain Federal agencies may require only an explanatory letter to the effect minor (no cost) changes. If you have questions please contact the Federal agency.

Column a.--If this is an application for a "New" project, enter the total estimated cost of each of the items listed on lines 1 through 16 (as applicable) under "COST CLASSIFICATIONS."

If this application entails a change to an existing award, enter the eligible amounts *approved under the previous award* for the items under "COST CLASSIFICATION."

Column b.--If this is an application for a "New" project, enter that portion of the cost of each item in Column a, which is *not* allowable for Federal assistance in determining the allowability of specific costs.

If this application entails a change to an existing award, enter the adjustment [+ or (-)] to the previously approved costs (from column a.) reflected in this application.

Column c.--This is the net of lines 1 through 16 in columns "a." and "b."

Line 1--Enter estimated amounts needed to cover administrative expenses. Do not include costs which are related to the normal functions of government. Allowable legal costs are generally only those associated with the purchase of land which is allowable for Federal participation and certain services in support of construction of the project.

Line 2--Enter estimated site and right(s)-of-way acquisition costs (this includes purchase, lease, and/or easements).

Line 3--Enter estimated costs related to relocation advisory assistance, replacement housing, relocation payments to displaced persons and businesses, etc.

Line 4--Enter estimated basic engineering fees related to construction (this includes start-up services and preparation of project performance work plan).

Line 5--Enter estimated engineering costs, such as surveys, tests, soil borings, etc.

Line 6--Enter estimated engineering inspection costs.

Line 7--Enter estimated costs of site preparation and restoration which are not included in the basic construction contract.

Line 9--Enter estimated cost of the construction contract.

Line 10--Enter estimated cost of office, shop, laboratory, safety equipment, etc. to be used at the facility, if such costs are not included in the construction contract.

Line 11--Enter estimated miscellaneous costs.

Line 12--Total of items 1 through 11.

Line 13--Enter estimated contingency costs. (Consult the Federal agency for the percentage of the estimated construction cost to use.)

Line 14--Enter the total of lines 12 and 13.

Line 15--Enter estimated program income to be earned during the grant period, e.g., salvaged materials, etc.

Line 16--Subtract line 15 from line 14.

Line 17--This block is for the computation of the Federal share. Multiply the total allowable project costs from line 16, column "c." by the Federal percentage share (this may be up to 100 percent; consult Federal agency for Federal percentage share) and enter the product on line 17.

ASSURANCES -- CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET, SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or State.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Secs. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Secs. 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Secs. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Secs. 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Secs. 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Secs. 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. Secs. 3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other non-discrimination provisions in the specific statute(s) under which application for Federal assistance is being made, and (j) the requirements of any other non-discrimination Statute(s) which may apply to the application.